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08 -07 -01

A

UTILITY
PATENT APPLICATION
TRANSMITTAL

Attorney Docket No.	ORT-1482
First Inventor	GRANT, Elfrida R.
Title	4-PYRIMIDINAMINE DERIVATIVES, PHARMACEUTICAL COMPOSITIONS AND RELATED METHODS
Express Mail Label No.	EL710607372US

1c979 U.S. PTO
09/22/01

08/06/01

APPLICATION ELEMENTS

See MPEP Chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.
3. ☒ Specification [Total Pages 82]
(Preferred arrangement set forth below)
 - Descriptive Title of the Invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R&D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. ☒ Drawing(s) (35 USC 113) [Total Sheets 9]
5. Oath or Declaration [Total Pages 5]
 - a. ☒ Unexecuted (original or copy)
 - b. ☐ Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 18 completed)
 - i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).

- 6.
- ☐
- Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
 - a. ☐ Computer Readable Form (CRF)
 - b. ☐ Specification Sequence Listing on:
 - i. ☐ CD-ROM or CD-R (2 copies); or
 - ii. ☐ paper
 - c. ☐ Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement
(IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. ☐ Request and Certifications under 35 U.S.C. 122
(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☐ Other

- 18.
- ☐
- If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-Part (CIP) of prior application No.: , filed .

Prior application information: Examiner Group Art Unit:

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label **000027777** or ☐ Correspondence Address belowName: Philip S. Johnson, Esq.
Address: Johnson & Johnson
One Johnson & Johnson Plaza
New Brunswick, NJ 08933-7003 USA

20. TELEPHONE CONTACT

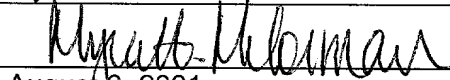
Please direct all telephone calls or telefaxes to Myra H. McCormack at:

Telephone: (732) 524-6932 Fax: (732) 524-2808

21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME Myra H. McCormack Reg. No. 36,602

SIGNATURE



DATE

August 6, 2001

109080"4222550

FEE TRANSMITTAL	<i>Complete if Known</i>	
	Application Number	TBD
	Filing Date	August 6, 2001
	First Named Inventor	GRANT, Elfrida R.
	Group Art Unit	
	Examiner Name	
	Attorney Docket Number	ORT-1482

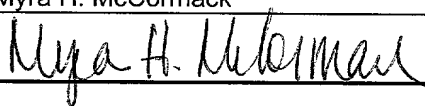
FEE CALCULATION

CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$710.00
TOTAL CLAIMS	66 - 20 =	46	x 18.00	\$ 828.00
INDEPENDENT CLAIMS	18 - 3 =	15	x 80.00	\$ 1200.00
MULTIPLE DEPENDENT CLAIMS	<input type="checkbox"/>	N/A	\$270.00	
			TOTAL FEES	\$ 2028.00

METHOD OF PAYMENT

- ☒ Please charge Deposit Account No. 10-0750/ORT-1482/MHM in the amount of \$2028.00. Three copies of this sheet are enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/ORT-1482/MHM. Three copies of this sheet are enclosed.

SUBMITTED BY:		<i>Complete (if applicable)</i>
Typed or Printed Name	Myra H. McCormack	Reg. No. 36,602
Signature		Deposit Account No. 10-0750
	Date: August 6, 2001	

IN THE UNITED STATES
PATENT AND TRADEMARK OFFICE

Applicant: GRANT et al.

For : 4-PYRIMIDINAMINE DERIVATIVES, PHARMACEUTICAL
COMPOSITIONS AND RELATED METHODS

Express Mail Certificate

"Express Mail" mailing number: EL710607372US

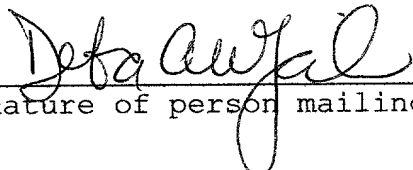
Date of Deposit: August 6, 2001

I hereby certify that this complete application, including specification pages, claims, informal drawings, and unexecuted declaration, is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, Washington, D.C. 20231.

A Combined Declaration and Power of Attorney will be submitted to the United States Patent and Trademark Office upon receipt of the U.S. Serial Number for this patent application.

Debra A. Wojcik

(Typed or printed name of person mailing paper or fee)


(Signature of person mailing paper or fee)

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